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**ATTACHED:** - FEE SHEET (PTO/SB/17), in duplicate; and  
- NOTICE OF APPEAL (PTO/SB/31), in duplicate.

Serial No.: 10/550,262  
Art Unit: 2174

Docket No.: PD030034  
Examiner: Andrey Belousov

**TOTAL NUMBER OF PAGES INCLUDING THIS SHEET: 5**

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APR 08 2009

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816).

**FEE TRANSMITTAL**  
for FY 2007☐ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$) **540.00**

Complete if Known

Application Number	10/550,262
Filing Date	September 22, 2005
First Named Inventor	Jobst Horentrup
Examiner Name	Andrey Belousov
An Unit	2174
Attorney Docket No.	PD030034

METHOD OF PAYMENT (check all that apply) **CUSTOMER NUMBER: 24498**☐ Check ☐ Credit card ☐ Money Order☐ None ☐ Other (please identify):☒ Deposit Account: Deposit Account Number **07-0832**

Deposit Account Name:

**THOMSON LICENSING LLC**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- or HP =	x	\$52	\$

HP = highest number of total claims paid for, if greater than 20.

Independent Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- or HP =	x	\$220	\$

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.18(e).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

FEE FOR NOTICE OF APPEAL - 540.00

Fees Paid (\$)
\$540.00

**SUBMITTED BY**

Name (Print/Type)	REITSENG LIN	Registration No. (Attorney/Agent)	42,804	Telephone	(609) 734-6813
Signature					April 8, 2009

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. The collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. There will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
<b>FEE TRANSMITTAL</b> for FY 2007		Application Number	10/550,262
		Filing Date	September 22, 2005
		First Named Inventor	Jobst Horentrup
		Examiner Name	Andrey Belousov
		Art Unit	2174
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	PD030034
TOTAL AMOUNT OF PAYMENT (\$)		540.00	

METHOD OF PAYMENT (check all that apply)		CUSTOMER NUMBER: 24498	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____			
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number <u>07-0832</u> Deposit Account Name: <u>THOMSON LICENSING LLC</u> For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)			
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)			
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>			
FILING FEES		SEARCH FEES	
Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)
Utility	300	150	500
Design	200	100	100
Plant	200	100	300
Reissue	300	150	500
Provisional	200	100	0
EXAMINATION FEES		EXAMINATION FEES	
Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee Paid (\$)
Utility	300	150	500
Design	200	100	100
Plant	200	100	300
Reissue	300	150	500
Provisional	200	100	0
<b>2. EXCESS CLAIM FEES</b>			
Fee Description		Small Entity	
Each claim over 20 (including Reissues)		50	
Each independent claim over 3 (including Reissues)		200	
Multiple dependent claims		360	
Total Claims		Multiple Dependent Claims	
Extra Claims		Fee (\$)	
- or HP =		Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.			
Independent Claims		Extra Claims	
- or HP =		Fee (\$)	
HP = highest number of independent claims paid for, if greater than 3.		Fee Paid (\$)	
<b>3. APPLICATION SIZE FEE</b>			
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(a)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
- 100 =	/ 50 =	(round up to a whole number) x	Fee Paid (\$)
<b>4. OTHER FEE(S)</b>			
Non-English Specification, \$130 fee (no small entity discount)			Fees Paid (\$)
Other (e.g., late filing surcharge):			
FEE FOR NOTICE OF APPEAL - 540.00			540.00

SUBMITTED BY					
Name (Print/Type)	REITSENG LIN	Registration No. (Attorney/Agent)	42,804	Telephone	(609) 734-6813
Signature					April 8, 2009

This collection of information is required by 37 CFR 1.130. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-6199 and select option 2.